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FAX COVER SHEET

Date: February 5, 2007

To: Commissioner of Patents

Mail Stop: Art Unit 1648

Fax Number: 571-273-8300

From: Jacqueline S. Bley

Patent Administrator & Paralegal

Fax Number: 650-624-4489

Telephone Number: 650-624-4585

Number of Pages (Including Cover): 6

Re: Serial Number: 10/758,683

Attorney Docket Number: 11068-078-999

Attached please find the following documents for filing:

1. Transmittal Form;

2. Fee Transmittal (2 copies); and

3. Response to Restriction Requirement.

Thank you and please contact me if you have any questions.

Sincerely.

Jacqueline S. Bley

Patent Administrator & Paralegal

Aimee Wallace (650-739-3900)

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		Application Number	10/758,683	1	, a Kan
	Filing Date	January 14, 2004			
TRANSMITTAL FORM	First Named Inventor	Whitcomb, Jeannette			
(to be used for all correspondence during pendency of filed application)		Group Art Unit Number	1648		
	Examiner Name	Parkin, Jeffrey S.			
Total Number of Pages in This Submission	5	Attorney Docket Number	11068-078-999		
EN	CLOSIDE				,
Fee Transmittal Form (in duplicate) Check Enclosed Return Receipt Postcard Response to Notice to File Missing Part Assignment & Recordation Cover Sheet Declaration Power of Attorney Application Data Sheet Information Disclosure Statement & PT Copies of IDS Cited Reference Request for Corrected Filing Receipt Request for Correction of Recorded Ass Amendment/Response: [2] Page(s) After Final Status Request Revocation and Substitute Power of Att REMARKS:	TO/SB/08A ces signment	S (check all that apply) Issue Fee Transmit Letter to Chief Dra Formal Drawing(s) Sheet(s) Appeal Communic Interferences Appeal Communic (Appeal Notice, B) Certified Copy of F After Allowance C	afisperson):) of Figure(s) action to Boar cation to Grou Brief, Reply B Priority Docu	d of Appeals and p rief) ment(s)	
SIGNA	TURE OF	ATTORNEY OR AGENT			
Signature:					
Print Name: H. Thomas Anderson,	1:				
Attorney/Reg. 40,895 No.:			Dated:	02/05/07	
CEPTIEIC	ATE OF F	ACSIMILE TRANSMISSION	ON		
I hereby certify that this correspondence, inc shown below via facsimile to: Commissione	cluding the en	enclosures identified above, is	being transn	nitted on the date	
Signature:		The state of the s			
Typed or Printed Name: Jacqueline S. Bl	eý		Dated:	02/05/07	
Facsimile Number:	571-273-830	00			

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FEE TRANS	MITTAL		Complete if Known		
		Application Number	10/758,683	FEB 0 5 2007	
for FY 2	በበፍ	Filing Date	January 14, 2004		
		First Named Inventor	Whitcomb, Jeannette		
Patent fees are subject to a Applicant claims small entity status.	nnual revision.	Examiner Name	Parkin, Jeffrey S.		
T. States,		Art Unit	1648		
TOTAL AMOUNT OF PAYMENT	(\$) 225	Attorney Docket No.	11068-078-999		

METHOD OF PAYMENT (check all that apply)						
	FEE CALCULATION (continued)					
☐ Check ☐ Credil Card ☐ Money Order ☐ Other ☐ None ☐ Deposit Account:	3. ADDITIONAL FEES					
Deposit Account Number 502266	Large Entity Small Entity			Entity	Fee Description	
Deposit Account Name Aclara Biosciences Inc.		Fee (S)	Fee Code	Fee	. So Suscription	Fee Paid
The Commissioner is authorized to: (check ell that apply) Charge fee(s) indicated below Credit any overpayments Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account. FEE CALCULATION 1. BASIC FILING FEE Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1051 1052 1053 1812 2,4 1804 9, 1805 1,8 1251 1 1252 4,1 1253 10,1 1254 1,5 1255 2,1 1401 5,1	200	2251 2252 2253 2254 2255 2401 2402 2403	(\$) 65 25 130 2,520 920* 1,840* 60 225 510 795 1,080 250 250 500 1,510	Surcharge - late filing fee or oath or declaration Surcharge - late provisional filing fee or cover sheet Non-English specification For filing a request for ex parte reexamination Requesting publication of SIR prior to Examiner action Requesting publication of SIR after Examiner action Extension for reply within first month Extension for reply within second month Extension for reply within third month Extension for reply within fourth month Extension for reply within fifth month Notice of Appeal Filing a brief in support of an appeal Request for oral hearing Petition to Institute a public use proceeding	\$225
SUBTOTAL (1) (\$)			2452	250	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Claims Fee from below Total Claims Independent Claims Multiple Dependent Large Entity Fee Fee Fee Code (\$) 1202 50 2202 25 Claims in excess of 20 1201 200 2201 100 Independent claims in excess of 3 1203 360 2203 180 Multiple dependent claim, if not paid "Reissue Independent claims over original patent 1205 50 2205 25 "Reissue claims in excess of 20 and over original patent	1503 110 1460 1807	500 500 500 500 500 500 500 500	2453 2501 2502 2503 1460 1807 1808 8021 2808 2810 2801 1802	750 700 400 650 —————————————————————————————————	Petition to revive - unintentional Utility Issue fee (or reissue) Design issue fee Plant Issue fee Petitions to the Director Processing fee for Provisional Applications Submission of Information Disclosure Stmt Recording each petent assignment per property (Ilmes number of properties) Filling a submission after final rejection (37 CFR 1 129(a)) For each additional invention to be examined (37 CFR 1.129(b)) Request for Continued Examination (RCE) Request for expedited examination of a design application	
SUBTOTAL (2) (\$) "or number previously paid, if greater; For Reissues, see above	Reduced by I	Basic Fi	ling Fee	Pald	SUBTOTAL (3) (\$)225	

Name (Print/Type)	if applicable)		
	Complete (if applicable)		
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Signature	02/05/07		

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

Whitcomb, Jeannette

Confirmation No.:

4994

Serial No.:

10/758,683

Art Unit:

1648

Filed:

January 14, 2004

Examiner: Parkin, Jeffrey S.

For:

MEANS AND METHODS FOR

Attorney Docket No:

11068-078-999

MONITORING NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITOR ANTIRETROVIRAL THERAPY AND GUIDING THERAPEUTIC

DECISIONS IN THE

TREATMENT OF HIV/AIDS

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this communication is being sent by facsimile transmission in accordance with §1 6(d) addressed to Mail Stop Amendment, No. (571) 273-8300, The Commissioner for Patents, P.O. 1450, Alexandria, VA 22313-1450 on the date shown below

RESPONSE TO RESTRICTION REQUIREMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

This paper responds to the Office Communication mailed October 04, 2006, in connection with the above-identified patent application.